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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 200.00

Complete if Known

Application Number	10/667,751
Filing Date	09/22/2003
First Named Inventor	Greene
Examiner Name	Wieker
Art Unit	3743
Attorney Docket No.	T0217.10U

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims _____ Extra Claims _____ Fee (\$): _____ Fee Paid (\$): _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims _____ Extra Claims _____ Fee (\$): _____ Fee Paid (\$): _____

2 - 3 or HP = _____ x 100.00 = 200.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets _____ Extra Sheets _____ Number of each additional 50 or fraction thereof _____ Fee (\$): _____ Fee Paid (\$): _____

_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____

Other (e.g., late filing surcharge): _____

SUBMITTED BY		
Signature		Registration No. 32,102 (Attorney/Agent)
Name (Print/Type)	Thomas C. Saitta	Telephone 904-346-5518
		Date 09/27/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Greene
Serial No.: 10/667,751
Filed: 09/22/2003
For: External Fixation Device for Cranialmaxillofacial Distraction
Art Unit: 3743
Examiner: Wicker

RESPONSE

This communication is in response to a first office action with mail date of June 27, 2005, in which the Examiner has required an election of species, has objected to claims 25 and 47 under Section 112, has rejected claims 1-6, 9-10, 23-28, 31-32 and 41-42 under Section 10(b) as anticipated by Mathues '058 or Doyle '891, has rejected claims 7-8, 10-12, 14, 29-30, 33-34 and 36 under Section 103(a) as obvious over Mathues or Doyle in view of Schwenn et al. '494, and has rejected claims 10, 13, 32 and 35 under Section 103(a) as obvious over Mathues or Doyle in view of Papay et al. '019.

Claims 47-49 are allowed.

Claims 16-19 and 37-40 are allowable if properly rewritten.

The above claim numbers are original claim numbers prior to amendment.

The undersigned certifies that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.

Date

9/27/05

Thomas C. Saitta

09/30/2005 HBERHE 00000047 10667751

01 FC:1201

200.00 OP

10/03/2005 HBERHE 00000081 10667751

01 FC:2201

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